County of San Diego Monthly STD Report

Volume 14, Issue 2: Data through September 2021; Report released March 7, 2022.





Table 1. STDs Reported Among County of San Diego Residents, by Month and **Previous 12 Months Combined**

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		2020				
		Previous 12-				
	September	Month Period*	Septembe	r Month Period*		
Chlamydia	1591	19889	1360	17711		
Female age 18-25	595	7444	482	6445		
Female age ≤ 17	64	714	45	588		
Male rectal chlamydia	102	1115	138	1499		
Gonorrhea	579	6134	728	8101		
Female age 18-25	81	1000	112	1237		
Female age ≤ 17	14	112	6	139		
Male rectal gonorrhea	80	726	129	1336		
Early Syphilis (adult total)	97	1121	109	1302		
Primary	12	171	24	212		
Secondary	40	382	30	412		
Early latent	45	568	55	678		
Congenital syphilis	2	21	1	22		

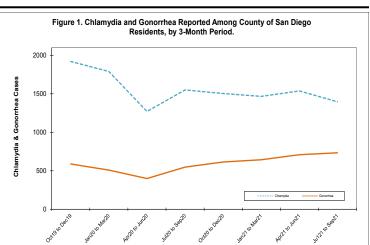
* Cumulative case count of the previous 12 months.

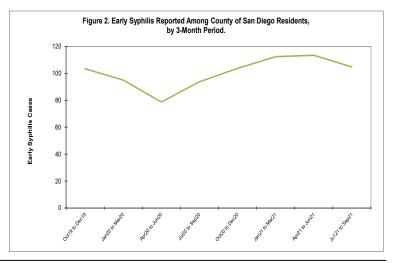
Table 2. Selected STD Cases and Annualized Rates per 100,000 Population for

San Diego County by Age and Nace/Ethnicity, Tear-to-Date.											
	All Races*		Asian/PI		Black		Hispanic		White		
	cases	rate	cases	rate	cases	rate	cases	rate	cases	rate	
All ages											
Chlamydia	13200	526.4	350	126.5	485	406.0	1291	150.6	1506	130.7	
Gonorrhea	6258	249.6	191	69.0	498	416.8	1014	118.3	1014	88.0	
Early Syphilis	993	39.6	54	19.5	103	86.2	425	49.6	325	28.2	
Under 20 yrs											
Chlamydia	2019	305.1	32	43.9	89	282.9	210	92.8	222	73.1	
Gonorrhea	514	77.7	11	15.1	44	139.8	70	30.9	60	19.8	
Early Syphilis	16	2.4	2	2.7	2	6.4	8	3.5	3	1.0	
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Note: Rates are calculated using 2020 Population Estimates; County of San Diego, Health and Human Services Agency, Public Health Services Division, Community Health Statistics Unit. 8/2021

Note: All data are provisional. Case counts are based on the earliest of date of diagnosis, date of specimen collection, and treatment date. Totals for past months might change because of delays in reporting from labs and providers.





Editorial Note: CDC Updates HIV Pre-Exposure Prophylaxis (PrEP) Guidelines

On December 8, 2021, the Centers for Disease Control and Prevention (CDC) issued updated guidelines for the provision of human immunodeficiency virus (HIV) pre-exposure prophylaxis (PrEP). Significant updates and/or changes to the guidelines are as follows:

- Addition of a recommendation to inform all sexually active adults and adolescents about PrEP.
- A new HIV testing algorithm for persons who have taken oral PrEP or post-exposure prophylaxis (PEP) in the last three months or injectable cabotegravir PrEP in the past 12 months, which includes HIV ribonucleic acid (RNA) testing. This was based on observed delays in diagnosis of baseline and incident HIV infections in persons with recent exposure to oral or injectable antiretroviral medication [1][2].
- Revision of the recommended frequency of assessing estimated creatinine clearance (eCrCl) to every 12 months for persons <50 years of age or with estimated CrCl ≥90 mL/min at PrEP initiation and every 6 months for all other patients.
- Addition of emtricitabine and tenofovir alafenamide (F/TAF) as a Food and Drug Administration (FDA)-approved option for cis-men who have sex with men (MSM) and transwomen at increased risk for HIV acquisition.
- Recommendations regarding the use of long-acting injectable cabotegravir, which was recently FDA-approved for use as HIV PrEP.
- Guidance for same-day initiation of PrEP and provision of PrEP through tele-health (i.e., "tele-PrEP").
- Procedures for off-label use of non-daily oral emtricitabine and tenofovir disoproxil fumarate (F/TDF) for PrEP for MSM. This strategy is also known as "on-demand," "event-driven," and "2-1-1" PrEP.

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^{*} Includes cases designated as "other," "unknown," or missing race/ethnicity,